

Please complete this form, and mail it to:

Transportation Demand Management Office
Hawaii Department of Transportation
869 Punchbowl Street, Room 506
Honolulu, Hawaii 96813

Carpool/Vanpool Matching Form

Date: _____

Please check as many as apply:

- ☐ I want to add passengers to my car/van to and from work.
- ☐ I want to be a passenger in a carpool or vanpool.
- ☐ I want to share the driving in a carpool.

Home and work addresses will be confidential. Other information will be used for ridematching purposes only.

Be specific in listing your home and work address (is it a Street (St.), Avenue (Ave.), Road (Rd.), etc?)

Forms without a phone number cannot be processed.

First Name _____
Last Name _____

Home Information

Home Address _____
Apt. No. _____ Nearest Cross Street _____
Home City _____ Zip Code _____
Home Phone _____

Work information

Employer _____
Work Address _____
Nearest Cross Street _____
Work City _____ Zip Code _____
Work Phone _____

Are your hours flexible by more than 20 minutes? ☐ YES ☐ NO

Start Work (hours/minutes) _____ ☐ AM ☐ PM

Leave Work (hours/minutes) _____ ☐ AM ☐ PM

- I normally get to work by:
- | | |
|---|---|
| <input type="checkbox"/> Drive alone | <input type="checkbox"/> Drive alone |
| <input type="checkbox"/> Carpool w/family | <input type="checkbox"/> Carpool w/non-family |
| <input type="checkbox"/> Drive and bus | <input type="checkbox"/> Drive and carpool |
| <input type="checkbox"/> TheBus | <input type="checkbox"/> Express Coach |
| <input type="checkbox"/> Motorcycle | <input type="checkbox"/> Moped |
| <input type="checkbox"/> Bicycle | <input type="checkbox"/> Walk/Jog |
| <input type="checkbox"/> Vanpool | <input type="checkbox"/> Other |

Additional Comments:
